

RECEIVED  
CENTRAL FAX CENTER  
NOV 14 2007

**FAX TRANSMISSION****DATE:** November 14, 2007**PTO IDENTIFIER:** Application Number 10/697,304-Conf. #9869  
Patent Number**Inventor:** Chih-Wei CHEN**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** BIRCH, STEWART, KOLASCH & BIRCH, LLP  
Joe McKinney Muncy**PHONE:** (703) 205-8026**Attorney Dkt. #:** 0698-0165P**PAGES (Including Cover Sheet):** 11**CONTENTS:** Amendment Transmittal (1 page)  
Amendment After Final Action Under 37 C.F.R. 1.116 (8 pages)  
Certificate of Transmission (1 page)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (703) 205-8026 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

**BIRCH, STEWART, KOLASCH & BIRCH, LLP**  
8110 Gatehouse Road, Suite 100 East, P.O. Box 747, Falls Church, Virginia 22040-0747  
Telephone: (703) 205-8000 Facsimile: (703) 205-8050

RECEIVED  
CENTRAL FAX CENTER

NOV 14 2007

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.  
Approved for use through 07/31/2006. OMB 0651-0031  
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

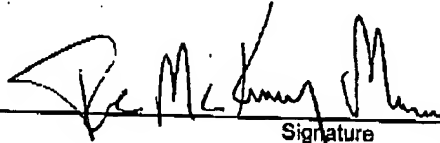
Application No. (if known): 10/697,304

Attorney Docket No.: 0698-0165P

**Certificate of Transmission under 37 CFR 1.8**

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on November 14, 2007  
Date



Signature

Joe McKinney Muncy

Typed or printed name of person signing Certificate

32,334

Registration Number, if applicable

(703) 205-8026

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

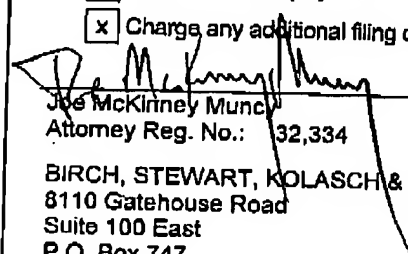
Amendment Transmittal (1 page)

Amendment After Final Action Under 37 C.F.R. 1.116 (8 pages)

**RECEIVED**  
CENTRAL FAX CENTER

**NOV 14 2007**

MS AF  
REPLY UNDER 37 C.F.R. § 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP

| AMENDMENT TRANSMITTAL LETTER  |   |   |                                   | Docket No.<br>0698-0165P |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |
|---|---|---|-----------------------------------|--------------------------|------|-------------------|--|--|--|--|--|--|---|---|-----------------------------------|------|--|--------------|---|--------|---|---------|------|-----------------------|---|-------|---|----------|------|--|--|--|--|--|--|-----------------------------|--|--|--|--|--|---|--|--|--|--|------|
| Application No.<br>10/697,304-Conf. #9869   | Filing Date<br>October 31, 2003           | Examiner<br>L. Chai                     | Art Unit<br>2131                  |                          |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |
| Applicant(s): Chih-Wei CHEN   |   |   |                                   |                          |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |
| Invention: METHOD FOR PROTECTING EMBEDDED SOFTWARE  |   |   |                                   |                          |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |
| <p>MS AF<br/>Commissioner for Patents<br/>P.O. Box 1450<br/>Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application.<br/>The fee has been calculated and is transmitted as shown below.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="6" style="text-align: center;">CLAIMS AS AMENDED</th> </tr> <tr> <th></th> <th>Claims<br/>Remaining<br/>After<br/>Amendment</th> <th>Highest<br/>Number<br/>Previously<br/>Paid</th> <th>Number<br/>Extra Claims<br/>Present</th> <th>Rate</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: center;">5</td> <td style="text-align: center;">- 20 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x 50.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>Independent<br/>Claims</td> <td style="text-align: center;">2</td> <td style="text-align: center;">- 3 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x 210.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="5">Other fee (please specify):</td> <td></td> </tr> <tr> <td colspan="5"><b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b></td> <td style="text-align: center;">0.00</td> </tr> </tbody> </table> <p><input checked="" type="checkbox"/> Large Entity <span style="margin-left: 100px;"><input type="checkbox"/> Small Entity</span></p> <p><input checked="" type="checkbox"/> No additional fee is required for this amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____.<br/>A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of \$ _____ is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u><br/>as described below. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> Credit any overpayment.</p> <p><input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.</p> <p><br/>Joe McKinney Munch<br/>Attorney Reg. No.: 32,334</p> <p><b>BIRCH, STEWART, KOLASCH &amp; BIRCH, LLP</b><br/>8110 Gatehouse Road<br/>Suite 100 East<br/>P.O. Box 747<br/>Falls Church, Virginia 22040-0747<br/>(703) 206-8026</p> <p style="text-align: right;">Dated: <u>November 14, 2007</u></p> |   |   |                                   |                          |      | CLAIMS AS AMENDED |  |  |  |  |  |  | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present | Rate |  | Total Claims | 5 | - 20 = | 0 | x 50.00 | 0.00 | Independent<br>Claims | 2 | - 3 = | 0 | x 210.00 | 0.00 | Multiple Dependent Claims (check if applicable) <input type="checkbox"/> |  |  |  |  |  | Other fee (please specify): |  |  |  |  |  | <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> |  |  |  |  | 0.00 |
| CLAIMS AS AMENDED   |   |   |                                   |                          |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |
|   | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present | Rate                     |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |
| Total Claims  | 5   | - 20 =                                  | 0                                 | x 50.00                  | 0.00 |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |
| Independent<br>Claims   | 2   | - 3 =                                   | 0                                 | x 210.00                 | 0.00 |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>  |   |   |                                   |                          |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |
| Other fee (please specify):   |   |   |                                   |                          |      |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>   |   |   |                                   |                          | 0.00 |                   |  |  |  |  |  |  |   |   |                                   |      |  |              |   |        |   |         |      |                       |   |       |   |          |      |  |  |  |  |  |  |                             |  |  |  |  |  |   |  |  |  |  |      |

Birch, Stewart, Kolasch & Birch, LLP

KM/slb

RECEIVED  
CENTRAL FAX CENTER

NOV 14 2007

Docket No.: 0698-0165P  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Chih-Wei CHEN

Application No.: 10/697,304

Confirmation No.: 9869

Filed: October 31, 2003

Art Unit: 2131

For: METHOD FOR PROTECTING EMBEDDED  
SOFTWARE

Examiner: L. Chai

**AMENDMENT AFTER FINAL ACTION UNDER 37 C.F.R. § 1.116**

MS AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated August 14, 2007, finally rejecting claims 11-15, please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.

Birch, Stewart, Kolasch & Birch, LLP

KM/slb